

Application/Control No.	Applicant(s)/Patent (	under
10/723,059	FREDERIKSEN, NI	ELS
Examiner	Art Unit	
A. Michael Chambers	3753	

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			ORIO	SINAL		CROSS REFERENCE(S)										
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		(As	sistan	t Examiner) (Date	e)		A. Michael (	Chamber	Total Claims Allowed: 5							
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	(Le	gar	nstruñ	nents Examiner) (	Date)	(Pi	imary Examiner)	(Da	1	1						

	Claims renumbered in the same order as presented by applicant								☐ CPA			☐ T.D.			☐ R.1.47				
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	3			33			63	<b>]</b> .		93			123			153			183
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3	10		,	40			70			100			130			160			190
4	11			41			71			101			131			161			191
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	21			51			81			111			141			171			201
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	23			53			83			113			143			173			203
	24			54			84			114			144			174			204
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